RI SOS Filing Number: 201752925670 Date: 11/2/2017 12:46:00 PM



Certificate of Authority

FOREIGN Corporation

→ Filing Fee: \$310.00 minimum

Pursuant to the provisions of RIGL <u>7-1.2-1405</u>, the undersigned foreign corporation hereby applies for a Certificate of Authority to transact business in the State of Rhode Island, and for that purpose submits the following statement:

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for that purpose submits the following statement:	45				
1. The name of the corporation is:					
Quavo, Inc.					
2. It is incorporated under the laws of: Delaware	,				
3. The name, if different, which it elects to use in Rh	ode Island is:				
(a) If the name of the corporation in its jurisdiction of "incorporated", or "limited," or an abbreviation therecabove corporate endings for use in Rhode Island:					
(b) If the corporate name is not available in Rhode Island, then set forth below the fictitious name under which the corporation will qualify and transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with this application:					
4. The date of its incorporation is: June 17, 201	5				
And the period of its duration is: CHECK ONLY ON Perpetual (on-going)	E BOX				
Date certain for dissolution					
5. The address of its principal office is:					
530 South 2nd Street, Unit GU2, Philadelphia, PA 19147					
6. The name and address of the initial registered ag	ent/office of in Rhode Island:				
Agent Name Corporation Service Company					
Street Address (<u>NOT</u> a P.O. Box) 222 Jefferson Boulevard, Suite 200					
City/Town Warwick	State RHODE ISLAND	Zip Code 02888			

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov **FILED**

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7. The purpose or purpo	ses which it pro	oposes to pu	rsue in th	e transaction of	busine	ss in Rhode Island are:	
Implementation and ac	dd-ons for the	Pegasysten	ns Platfor	m			
(2 /a) The names and re	anastira addus	of its di		matamatlaa			
state or country of which			rectors (o	ptional, unless t	airectors	s are required under the laws of the	
NAME				ADDRESS			
David Chmielewski	530 South 2nd Street			t, Unit GU2, Philadelphia, PA 19147			
Richard Jefferson 530 South 2nd Stree		et, Unit GU2, Philadelphia, PA 19147					
Kevin Mayes 530 South 2nd Stree		et, Unit GU2, Philadelphia, PA 19147					
Daniel Penne	530 South 2nd Street		t, Unit GU2, Philadelphia, PA 19147				
	<u> </u>				Check	the box to indicate an attachment.	
8. (b) The names and re of the state or country o	•	•	rincipal off	icers (mandator	ry if dire	ctors are not required under the laws	
OFFICE	NAME		ADDRESS				
PRESIDENT	Richard Jefferson		530 South 2nd Street, Unit GU2, Philadelphia, PA 19147				
VICE PRESIDENT	n/a						
TREASURER	Daniel Penne		530 South 2nd Street, Unit GU2, Philadelphia, PA 19147				
SECRETARY	Joseph McLean		530 South 2nd Street, Unit GU2, Philadelphia, PA 19147				
	1				Checl	k the box to indicate an attachment.	
9. The aggregate number par value, and series, if			thority to i	ssue; itemized b	by class	es, par value of shares, shares without	
NUMBER OF SHARES	CLASS	CLASS		SERIES		PAR VALUE OR STATE NO PAR VALUE	
4,000,000	Common	Common Voting				0.0001	
1,000,000	Common	n Non-Voti		ng	0.0001		
:				. •			
10 (a) Estimate in dal	Hama Alba valva	-£ -11	. da ha	/h\	<u></u>	All and a second	
(a) Estimate, in dol owned by the corporatio located:						the value of the corporation's property ode Island during the following year:	
\$ 50,000				\$ <u>2</u> ,	,000		
(c) Estimate, as a perce within this state during the following year, wherever	he following yea	ar bears to th	ne value o	f all property of t	the corp	y of the corporation to be located poration to be owned during the obtain the percentage.	

11. (a) Estimate, in dollars, the gross amount of business to be transacted by the corporation during the following year.	(b) Estimate, in dollars, the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year.				
\$ <u>5,000,000</u>	\$100,000				
(c) Estimate, as a percentage, the proportion of the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year compared to the gross amount thereof which will be transacted by the corporation during the following year. Note: Divide (11b) by (11a) and multiply by 100 to obtain the percentage.					
%					
12. This application must be accompanied by a Certificate of Good Standing/Letter of Status issued by the proper officer of the state or country under the laws of which it is incorporated that is dated within 60 days of the filing of this document.					
13. Date when the Certificate of Authority will be effective: CHECK ONLY ONE BOX					
✓ Date received (Upon filing)					
Later effective date (Date must be no more than 90 days from the day of filing)					
Under penalty of perjury, I declare and affirm that I have examined this Application for Certificate of Authority, including any accompanying attachments, and that all statements contained herein are true and correct.					
Type or Print Name of Authorized Officer	Date				
Daniel Penne, Treasurer	11/1/2017				
Signature of Authorized Officer of the Corporation	•				
Don Bome SIGN DOCK	JMENT HERE				

Quavo, Inc.

Directors continued

Name Address

Joseph McLean 530 South 2nd Street, Unit GU2, Philadelphia, PA 19147



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "QUAVO, INC." IS DULY INCORPORATED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE FIRST DAY OF NOVEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "QUAVO, INC." WAS INCORPORATED ON THE SEVENTEENTH DAY OF JUNE, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

R.I. DEP SAME DIVE

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Authentication: 203500925

Date: 11-01-17

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I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

November 02, 2017 12:46 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

